



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE FOR ADMINISTRATION AND FINANCE
HUMAN RESOURCES DIVISION
100 CAMBRIDGE STREET, SUITE 600, BOSTON, MA 02114

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MICHAEL J. HEFFERNAN
Secretary

JEFF McCUE
Assistant Secretary
Chief Human Resources Officer

VENDOR ASSESSMENT CENTER DETAILS FORM

The following information is required by the Human Resources Division at least 8 weeks prior to the desired Assessment Center date to process the examination request for a delegated Assessment Center (AC).

Return to Civil Service at: Sebastian.Moscardi@mass.gov (Police and Fire)

Vendor:

Municipality:

Department:

Exam Rank:

Desired AC Date*:

**Will require confirmation with municipality.*

Exam Location (If Known):

Photo ID Required At Testing Site: ☐

Assessment Center Exercises

The content of these exercises will NOT be displayed to, nor shared with, candidates.

Assessment Center Exercise One:

Duration for each candidate: Hours: Minutes:

Job Duties & Skills Simulated by Assessment Center Exercise:

Assessment Center Exercise Two:

Duration for each candidate: Hours: Minutes:

Job Duties & Skills Simulated by Assessment Center Exercise:

Assessment Center Exercise Three:

Duration for each candidate: Hours: Minutes:

Job Duties & Skills Simulated by Assessment Center Exercise:

Assessment Center Exercise Four:

Duration for each candidate: Hours: Minutes:

Job Duties & Skills Simulated by Assessment Center Exercise:

Assessment Center Exercise Five:

Duration for each candidate: Hours: Minutes:

Job Duties & Skills Simulated by Assessment Center Exercise:

Assessment Center Exercise X(Continue Numbering as needed, copy and paste):

Duration for each candidate: Hours: Minutes:

Job Duties & Skills Simulated by Assessment Center Exercise:
